

## ISSUE SLIP STAPLE AREA (for additional cross references)

19  
3/16/01

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>		49	3/7/01
<b>FORMALITY REVIEW</b>	PR	1019	3/8/01
<b>RESPONSE FORMALITY REVIEW</b>	SG	1077	3/14/01

## INDEX OF CLAIMS

Rejected N ..... Non-elected  
 Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ Restricted O ..... Objected

Claim	Date
Final	
Original	
1	12
2	15
3	2
4	0
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10	0
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12	0
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23	N
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28	N
29	0
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32	0
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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H-5  
3-16-01